



## SMOKE DETECTOR APPLICATION CITY OF SAN ANTONIO

Please circle either Y for Yes or N for No for each of the questions below.

- |  |   |   |
|--|---|---|
| 1. Do you own your home?                         | Y | N |
| 2. Is your home in the City of San Antonio?      | Y | N |
| 3. Do you have a smoke detector in your home?    | Y | N |
| 4. Would you like a smoke detector in your home? | Y | N |

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE NUMBER: (210) \_\_\_\_\_

AGE: \_\_\_\_\_

DISABILITY (if applicable) \_\_\_\_\_

Members of the San Antonio Fire Department will contact you to install your smoke detector. This program is only eligible to people living in single family dwellings.

Neither the City of San Antonio, nor the San Antonio Fire Department is responsible for possible improper installation or defective smoke detectors.

By signing below, I agree to participate in this program.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

**ONLY ONE APPLICATION IS REQUIRED. APPLY BY EITHER:**

- ✓ Calling 2-1-1 (Mon.-Fri., 9 a.m. to 4 p.m.)
- ✓ Mailing this application form to:  
Ms. Suzanne Carter  
United Way of San Antonio  
P.O. Box 898  
San Antonio, Texas 78293-0898
- ✓ Returning this form to your Agency/Provider: \_\_\_\_\_
- ✓ Accessing on-line application at: <http://www.unitedwaysatx.org>  
<http://www.sanantonio.gov/comminit>  
<http://www.sanantonio.gov/safd>